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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P93000046548**

O'NEILL INTERNATIONAL, INC.

	· · · · · · · · · · · · · · · · · · ·				
Principal Plac	e of Business	Mailing Address			par de e
0000 11 1 000 111111 111111111		3020 N FEDERAL HWY			
BUILDING 11. SECOND FLOOR BUILDING 11. 2ND FLOOR		ne ·	DO NOT WRITE IN THIS	CDACE	
FORT LAUDERDALE FL 33306 FORT LAUDERDALE FL 333 US US			Uo .	3. Date Incorporated or Qualifed	STACE
US				06/25/1993	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0423008	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		J. Collinate of Class Decision	Fee Required
City & Sta	te 😁	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24	25		30	Personal Property Tax.	Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Registered	Agent
OIN	CIII LIADDV		81 Name		Ì
	EILL, HARRY O N FEDERAL HIGHWAY		82 Street Add	dress (P.O. Box Number is Not Acceptable)	
	LDING 11, 2ND FLOOR		83		
FUF	RT LAUDERDALE FL 33306		84 City		85 Zip Code
			1-1-7	F!	-
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such change was au	utnorized by the corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appo	r changing its registered intiment as registered
SIGNATORE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered Agent signature requi		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	O'NEILL, HARRY J.		1.2 NAME	•	
STREET ADDRESS		11, 2ND FLOOR	1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL.		1.4 CITY-ST-ZIP		
TITLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS	3		2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME)
STREET ADDRESS	5		3.3 STREET ADDRESS	•	
CITY-ST-ZIP	1		3.4. CITY-ST-ZIP	•	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	}		4, 2 NAME	,	
STREET ADDRESS			4.3 STREET ADDRESS	•	ļ
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		
NAME		_		•	☐ Change ☐ Addition
STREET ADDRESS			5.2 NAME		☐ Change ☐ Addition
	' I		5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition
CITY-ST-ZIP			5.3 STREET ADDRESS		☐ Change ☐ Addition
TIDE		. □ DELÉTF		· ·	☐ Change ☐ Addition ☐ Change ☐ Addition
TITLE		DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	· .
NAME		DELETE	5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	• ,

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: